

I also would like to recognize their teacher, Michael Trofi, who deserves much of the credit for the success of the team. The district coordinator, Carlo Gamba, and the State coordinator, Henry Cote, also contributed a significant amount of time and effort to help the team reach the national finals.

The We The People . . . The Citizen and Constitution Program is the most extensive educational program in the country developed specifically to educate young people about the Constitution and the Bill of Rights. The 3-day national competition simulates a congressional hearing in which students' oral presentations are judged on the basis of their knowledge of constitutional principles and their ability to apply them to historical and contemporary issues.

Administered by the Center for Civic Education, the We The People program, now in its 10th academic year, has reached more than 75,000 teachers, and 24 million students nationwide at the upper elementary, middle, and high school levels. Members of Congress and their staff enhance the program by discussing current constitutional issues with students and teachers.

The We the People program provides an excellent opportunity for students to gain an informed perspective on the significance of the U.S. Constitution and its place in our history and lives. I wish these students the best of luck in the national finals and look forward to their continued success in the years ahead.

HOSPITAL OUTPATIENT OVERCHARGES: WHY WE NEED TO REFORM MEDICARE'S PAYMENT SYSTEM

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, April 23, 1997

Mr. STARK. Mr. Speaker, the President's budget proposes to reform a major defect in Medicare—the ability of hospital outpatient departments [HOPDs] to overcharge beneficiaries. Due to the way the law is worded, patients today pay—on average—about 45 percent of the allowable cost of a hospital outpatient procedure. They should be paying 20 percent. Unless fixed, the problem will just get worse and worse, with seniors and the disabled paying more and more. Simply put, the problem arises because Medicare pays the hospital on the basis of reasonable cost, while the beneficiary is stuck with 20 percent of charges—and charges can be anything the hospital wants to say they are.

On February 4, Representative COYNE and myself introduced a bill, H.R. 582, to provide for an immediate correction of this serious Medicare beneficiary problem. I urge the Budget Committee, as it considers the size of the Medicare budget cuts, to make an allowance for the fixing of this problems.

In the meantime, the public should be advised to shop around for a better price than the HOPDs offer. Of the roughly 7,000 procedures that are done in HOPDs, 2,700 are also done safely and competently in ambulatory surgical centers [ASCs], where the price is usually much lower—and where the beneficiaries copay is limited to 20 percent.

Following are some examples of the difference to a patient in using an ASC instead

of an HOPD. Newspapers, the electronic media, and consumer groups could do a great service to the Nation's seniors and disabled by checking on these prices in their local market and advertising the difference to seniors. Caveat emptor—big time.

COMPARISON OF HOSPITAL AND ASC FEES

ILLUSTRATIVE EXAMPLE NO. 1

Description:

Procedure: Inguinal Hernia Repair.

Location: Milwaukee, Wisconsin.

CPT Code: 49505.

Date: June 18, 1996.

	Comparative payments—	
	ASC	Local hospital
Retail Charge	\$1,816	\$3,171
HCFA Approved .....	.....	3,171
HCFA Payment	587	2,537
Patient Co-payment	117	634

COMPARISON OF HOSPITAL AND ASC FEES

ILLUSTRATIVE EXAMPLE NO. 2

Description:

Procedure: Breast Biopsy.

Location: Milwaukee, Wisconsin.

CPT Code: 19120.

Date: July 29, 1996.

	Comparative payments—	
	ASC	Local hospital
Retail Charge	\$899	\$1,237
HCFA Approved .....	.....	1,237
HCFA Payment	473	989
Patient Co-payment	95	247

COMPARISON OF HOSPITAL AND ASC FEES

ILLUSTRATIVE EXAMPLE NO. 3

Description:

Procedure: Cataract w/IOL.

Location: Milwaukee, Wisconsin.

CPT Code: 66984.

Date: August 15, 1996.

	Comparative payments—	
	ASC	Local hospital
Retail Charge	\$1,419	\$4,417
HCFA Approved .....	.....	1,617
HCFA Payment	914	1,294
Patient Co-payment	183	323

COMPARISON OF HOSPITAL AND ASC FEES

ILLUSTRATIVE EXAMPLE NO. 4

Description:

Procedure: Colonoscopy w/Tumor Removal.

Location: Pasadena, California.

CPT Code: 45385.

Date: January 23, 1996.

	Comparative payments—	
	ASC	Local hospital
Retail Charge .....	.....	\$1,583
HCFA Approved .....	.....	1,186
HCFA Payment	\$442	1,186
Patient Co-payment	88	396

TWO YEAR ANNIVERSARY OF THE OKLAHOMA CITY BOMBING—APRIL 21, 1997

HON. THOMAS J. MANTON

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Wednesday, April 23, 1997

Mr. MANTON. Mr. Speaker, I rise today to commemorate the second anniversary of the

Oklahoma City bombing. On April 19, 1995, a car bomb exploded outside the Alfred P. Murrah Federal Building in Oklahoma City, OK, killing 169 people and injuring hundreds more. This act of cowardice was an attack on innocent children and defenseless citizens, and struck at the very heart of our democracy.

This act of terrorism, the worst in the Nation's history on American soil, shocked, frightened, angered and saddened the citizens of Oklahoma and the United States. But throughout this time of hardship, the acts of courage, compassion, and professionalism by the citizens of Oklahoma and countless volunteers that descended upon the Murrah building are indelibly etched in the memories of people all over the world. These heroes, which included law enforcement officers, firefighters, search and rescue professionals, doctors, nurses, and volunteers throughout the country, gave selflessly in providing comfort and compassion to the victims of the attack and their families.

Mr. Speaker, as a Member of Congress who hails from New York City, the site of the World Trade Center Bombing 4 years ago, I know the fear and loss which these cowardly acts can have on a community. While the devastation which occurred in Oklahoma City is far greater than that which New York sustained, I know the people of New York have a special affinity for the suffering experienced by the families and friends of the victims of the Oklahoma tragedy.

I think all Americans agree that this victimization of innocent people is a trend which we cannot allow to continue. That is why I introduced and urge my colleagues to join me in co-sponsoring H.R. 538, the Explosives Fingerprinting Act, which would require explosive manufacturers to use high technology additives—taggants—in their explosives. These taggants would serve as identifying signatures which show where and when a particular explosive material was made. This legislation, which I originally offered during the 103d Congress in response to the World Trade Center bombing, is supported by major law enforcement agencies, including the Bureau of Alcohol, Tobacco and Firearms.

Mr. Speaker, it is time to give our law enforcement officials a valuable new tool in their arsenal. I would encourage my colleagues to join me as cosponsors of this important legislation, thereby taking a small step toward making sure another terrorist act like the bombing in Oklahoma City does not occur again.

Finally, Mr. Speaker, I would like to again express my deepest sympathies to the families and friends of the victims of Oklahoma City on this the second anniversary of the Oklahoma City bombing.

INS AND CITIZENSHIP

HON. RON PACKARD

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, April 23, 1997

Mr. PACKARD. Mr. Speaker, I rise today to discuss an issue which disturbs me greatly. Just 3 months ago the Justice Department reported that the Immigration and Naturalization Service allowed some 180,000 people to become citizens without fully completing the required criminal background checks.